

## ISSUE SLIP STAPLE AREA (for additional cross references)

5/16/01

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>			
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	5/21/03
2	✓		
3	✓		
4	✓		
5	✓		
6	✓		
7	✓		
8	✓		
9	✓		
10	✓		
11	✓		
12	✓		
13	✓		
14	✓		
15	0		
16			
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19			
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21			
22	0		
23	✓		
24	0		
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33	0		
34	N		
35	N		
36	N		
37	N		
38	N		
39	N		
40	=		
41			
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43			
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47	=		
48	✓		
49	✓		
50	✓		

Claim	Final	Original	Date
51	✓	✓	5/21/03
52	0		
53	1		
54	0		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
use additional sheet here

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